

## *EXHIBIT D*

# **COMPREHENSIVE REHABILITATION EVALUATION**

Containing

**History of Present Illness  
Medical Records Review  
Patient Observation  
Diagnostic Impression  
Assessment  
Vocational Position Statement  
AMA Impairment Rating  
Functional Assessment  
Continuation of Care  
Summary Report  
Photographs  
Documentation**

On

## **Shane Loveland**

Prepared by:

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**Board Certified Physical Medicine & Rehabilitation**

**Fellow, International Academy of Independent Medical Evaluators**

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# **Continuation of Care**

# **METHODOLOGY**

## **Primum Non Nocere**

The methodologies utilized to produce a Continuation of Care plan require a three-stage process, which consists of collecting facts, formulating opinions, and producing conclusions. This methodology requires sample data from sources that are geographically proximate to the patient's primary residence or location of probable care. This three-stage methodology has been documented in peer review journal articles published in 2014 and 2015 by The American Academy of Physical Medicine and Rehabilitation (Volume 6, 184-187, February 2014 and P.M.R. February 2015, 68-78). The Continuation of Care portion of this report was produced following the exact Continuation of Care methodology that has been peer reviewed, published and accepted, February 2014 and 2015, by The American Academy of Physical Medicine and Rehabilitation.

The need and frequency for future medical treatment and care is based on my own medical knowledge, training, and clinical practice experience, which exceeds 26 years and over 100,000 hours (Tab #10), as well as peer reviewed literature (Tabs #4 through #9). The costs are confirmed by the patient's treating physicians (Tabs #2 and \$3).

It is my medical opinion that these costs do not take into account the costs that are associated with medical complications, which include but are not limited to, deep vein thrombosis, pulmonary embolus, pneumonia, urinary tract infections, cellulitis, osteomyelitis, sepsis, cardiac arrhythmia, cardiac arrest, global anoxic brain injury, cerebrovascular accident, renal failure, need for renal transplant, liver failure, need for liver transplant.

If the patient suffered one or a combination of the above medical complications, then the cost for future medical care would be substantially greater.

Continuation of Care

Date: 06/09/17  
 Patient: Shane Loveland

Medical Care	Period Over Which Services Provided	Frequency	Cost Per Visit/Item
<u>Medical Care:</u>			
Neurologist	Life	2-4x Yr and Prn	200.00/OV *
Cardiologist	Life	Prn	384.00/OV
Orthopedic Surgeon	Life	Prn	182.-278.00/OV
Gastroenterologist	Life	Prn	150.-410.00/OV
Physiatrist	Life	2-4x Yr & Prn	100.00/OV
Pulmonologist	Life	Prn	150.-410.00/OV
Ophthalmologist	Life	1x Yr & Prn	100.00/OV

\*Per Dr. Morgan LaHolt (Neurologist). See Documentation, (Tab #2).

Continuation of Care  
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Medical Care	Period Over Which Services Provided	Frequency	Cost Per Visit/Item
<i>Medical Care (Continued):</i>			
ENT	Life	Prn	171.00/OV
Primary Care	Life	2-4x Yr & Prn	100.-400.00/OV*
Neurosurgeon	Life	Prn	90.-531.00/OV
Urologist	Life	1x Yr & Prn	120.-300.00/OV

Diagnostic Tests:

Electroencephalogram	Life	Prn	871.00
EKG	Life	Prn	41.00
Echocardiogram	Life	Prn	763.-876.00
MRI of Brain	Life	Prn	641.-1,156.00
MRI - Lumbar Hips/Pelvis	Life	Prn	642.00 629.00 ea

\*Per Dr. Chad Murray (Primary Care). Please see Documentation, (Tab #2).

**Continuation of Care**  
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<b>Medical Care</b>	<b>Period Over Which Services Provided</b>	<b>Frequency</b>	<b>Cost Per Visit/Item</b>
<i><u>Diagnostic Tests:</u></i> (Continued)			
X-ray Thoracolumbar	Life	1 x Yr/Prn	85.00
X-ray Lumbosacral	Life	1x Yr/Pr	85.00
X-ray Chest/Lung	Life	Prn	68.00
Barium Swallow	Life	1x Yr/Prn	306.00
Renal Scan/Ultrasound	Life	Prn	289.00
*CBC with Differential	Life	2x Yr & Prn	32.00
*Hepatic Panel	Life	1x/4 Months	41.00
*Comp. Metabolic Panel	Life	1x/Ev 3 Months	46.00
*Serum Level of Anti-Seizure Medication	Life	1x Ev 3-6 Months	91.00-100.00
Routine Urinalysis	Life	2-3 Yr & Prn	31.00
Urine Culture & Sensitivity	Life	Prn	64.00

\*If patient is on anti-seizure medication such as Dilantin, Tegretol, Depakote or Phenobarbital.

Continuation of Care  
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Medical Care	Period Over Which Services Provided	Frequency	Cost Per Visit/Item
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Possible Surgical Procedures and Potential Complications:

Pulmonary Life

Urological Life

Thrombophlebitis Life

Renal  
Complications Life

Seizure Activity Life

Hydrocephalus Life  
Requiring VP

Shunt

Infection of Shunt

Shunt Replacement

Endoscopy

Aspiration Pneumonia

Urosepsis

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**COSTS**

**CANNOT**

**BE DETERMINED**

**WITH MEDICAL**

**CERTAINTY.**



**Continuation of Care**  
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<b>Medical Care</b>	<b>Period Over Which Services Provided</b>	<b>Frequency</b>	<b>Cost Per Visit/Item</b>
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**Therapeutic Evaluations:**

Physical Therapy	Life	1x Yr & Prn	75.00
Occupational Therapy	Life	1x Yr & Prn	135.00
Speech/Cognitive	Life	1x Yr & Prn	91.61

**Outpatient Therapy:**

Physical	Life	3x Wk for 1 Yr and Prn	75.00/Visit
Occupational/ADL	Life	3x Wk for 1 Yr and Prn	135.00/Visit
Speech/Cognitive	Life	3x Wk for 1 Yr and Prn	78.89/Visit

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Medical Care	Period Over Which Services Provided	Frequency	Cost Per Visit/Item
<u>Support Care:</u>			
**Aide & Attendant Care	Life	24 hrs/Day * R.N. 7 days/Wk * L.P.N. 52 wks/Yr	75.-100.00/Visit 25.00/Hr
Housekeeper	Life	2-4 Hrs/Wk 1 Day/Wk	15.00/Hr (Approximate)
Case Manager	Life	2-3x/Mo	75.-100.00/Visit

\*During periods of medical stability, if the patient is on medications, an L.P.N. can provide the patient's aide and attendant care, (95% of the time).

\*During periods of medical fragility, an R.N. must provide the care, (5% of the time).

\*\*Per Dr. Chad Murray (Primary Care). Please see Documentation, **(Tab #2)**.

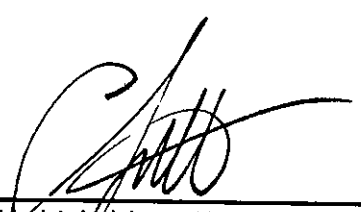
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<b>Medical Care</b>	<b>Period Over Which Services Provided</b>	<b>Frequency</b>	<b>Cost Per Visit/Item</b>
<u>Mobility: *</u>			
Wheeled Walker	Life	1x Ev 5-7 Yrs	199.00
Manual Wheelchair	Life	1x Ev 5-7 Yrs	1,619.00
Roho Cushion	Life	1x Yr	357.00
<u>Medications:</u>			
Prozac 20 mg	Life	1x day	169.00 (30)
Amantadine 100 mg	Life	2x day	117.29 (60)
Pantoprazole 40 mg	Life	2x day	16.00 (30)
Amitiza 24 mcg	Life	2x day	114.00 (30)
Warfarin 5 mg	Life	1 at bedtime	9.00 (30)
Risperidone 1 mg	Life	3x day	190.00 (30)
Depakote 125 mg	Life	4 in A.M., 4 mid-day, 4 in P.M.	55.00 (60)
Tramadol 50 mg	Life	4x day	22.00 (30)
Trazodone 100 mg	Life	2 at night	7.00 (30)
Acetaminophen 500 mg	Life	2 tabs, 3x day	9.00 (30)
<u>Personal Items *</u>			
Depends	Life	5 per day	19.99 (28)
Disposable Underpads	Life	1-2 per day	31.30 (100)

\*See printouts in Documentation Section, (Tab #3).

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Medical Care	Period Over Which Services Provided	Frequency	Cost Per Visit/Item
<u>Housing:</u>			
Handicap Accessible Home	1 X	200,000.00-450,000.00	
<u>Transportation:</u>			
Handicap Accessible Van	Life	1x Ev 5-7 Yrs	45,000.00- 75,000.00
Automobile Association (Yearly + Plan)	Life	Yearly	59.50
Cellular Phone (Portable)	Life	1 Ev 5-7 Yrs	39.99 and Up



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